# TEACHER'S BOOK

## OF FORMS

**REM 163** 

#### A TEACHING RESOURCE FROM





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# Computer Log

Date	Student Name	Disk # or Name	# Minutes Used	Score or Comments
-				

#### **Classroom Inventory Sheet**

School Year \_\_\_\_\_

Teacher			_ Classroom #	_ Date
	QTY	INVENTORY NO.	CONDITION/CO	MMENTS
Room Furniture				
tables		1 1		
chairs				
student desks				
teacher desks				
file cabinets				
Books, Workbooks, etc.				
Room Supplies				
art materials				
pencils				
chalk				
maps				
flag				
		-		
Audio-Visual Tools				
computer				
filmstrip projector				
TV/VCR				
screen				
movie projector				
overhead projector				

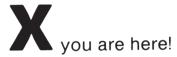


(Things I'd like to have for my class someday.)

ITEM DESCRIPTION	FOR CLASS/SUBJECT	PURCHASING INFORMATION (catalog #, quantity needed, company name & address, unit price, total cost)

### **Seating Chart**

Tacabar	Hour/Class	Room
Teacher	Hour/Class	NUUIII



# Aide Assignment Sheet Working with Students

Name		Date
Activity	Students Involved	Comments
help students with assignments		
☐ listen to oral reading		
help with the following learning center activity:		
☐ review flash cards		
☐ record dictation		

### **Substitute Notes**

Date			
Teacher		Room/Class	Grade
Time class starts	ends		
Subject Assignment			
Materials needed:			
Where to find materials:			
Class procedure:			
Special duties/comments:			
Emergency procedures:			
Emergency procedures.			
For help (reliable student or near	by teacher)	:	
Students who will be leaving this	class:		
Name	Time		Class/Reason
	***************************************		

## **Weekly Plan**

Class/Subject	Week of
, and the second	Hour/Period
Materials Needed:	
Topic(s):	
Objectives:	

DAY	ACTIVITIES/CONTENT COVERED	ASSIGNMENTS
Monday		
uesday		
Wednesday		
Thursday		
Friday		

Notes for next week:

### **Student Information Sheet**

School Year \_\_\_\_\_

Name (last, first, initial)				
	SS#			
Date of Birth	_ Present age		Grade	
Father's Name	i			
Mother's Name				
Siblings, ages/school				
Parents' Place of Employment		Work #		OK to call?
Father				
Mother			<del></del>	
Home Address				
Home Phone				
Emergency Phone/Designated Person				
Medication/Allergies				
Doctor		_ Phone		
Arrives at School by: bus (#)	_ walks	other		
Other pertinent information/numbers:				